

PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement and any additional documentation to: **Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW Washington, DC 20503.**

<p>1. Agency/Subagency originating request United States Environmental Protection Agency/OPEI</p>	<p>2. OMB control number b. X None a. _____ - _____ 2010</p>
<p>3. Type of information collection (<i>check one</i>)</p> <p>a. <input type="checkbox"/> X New collection</p> <p>b. <input checked="" type="checkbox"/> G Revision of a currently approved collection</p> <p>c. <input checked="" type="checkbox"/> G Extension of a currently approved collection</p> <p>d. <input checked="" type="checkbox"/> G Reinstatement, without change, of a previously approved collection for which approval has expired</p> <p>e. <input checked="" type="checkbox"/> G Reinstatement, with change, of a previously approved collection for which approval has expired</p> <p>f. <input checked="" type="checkbox"/> G Existing collection in use without an OMB control number</p> <p><i>For b-f, note item A2 of Supporting Statement Instructions</i></p>	<p>4. Type of review requested (<i>check one</i>)</p> <p>a. <input type="checkbox"/> X Regular</p> <p>b. <input checked="" type="checkbox"/> G Emergency - Approval requested by: ____/____/____</p> <p>c. <input checked="" type="checkbox"/> G Delegated</p> <p>5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input checked="" type="checkbox"/> G Yes <input type="checkbox"/> X No</p> <p>6. Requested expiration date a. <input type="checkbox"/> X Three years from approval date b. <input checked="" type="checkbox"/> G Other Specify: ____/____/____</p>
<p>7. Title Eliciting Risk Tradeoffs for Valuing Fatal Cancer Risks</p>	
<p>8. Agency form number(s) (<i>If applicable</i>) 2057.01</p>	
<p>9. Keywords cancer risks, value of statistical life, latency period</p>	
<p>10. Abstract The purpose of the survey is to provide data that will improve valuation estimates of the benefits of fatal cancer risk reductions. The existing literature on mortality risk values has focused almost exclusively on accidental and immediate deaths; however, it is unclear how applicable these values are for assessing the benefits of fatal cancer risks, which can involve extended periods between exposure on disease onset (latency) and between onset and death (morbidity). The proposed survey will present respondents with choice scenarios involving tradeoffs between different levels and types of risks, It will specifically explore how individuals' tradeoffs between risks are affected by (1) the type of cancer involved and (2) differences in the length of the latency and morbidity periods from cancer. The results will provide empirically-based ratios, which can be used to adjust existing mortality risk value estimates according to these factors. We are requesting OMB permission to conduct a pretest (350 respondents) and full-scale survey (2000) respondents, using an established panel of respondents and a webTV mode of administration. Each survey will take approximately 25 minutes, and data will be collected and stored electronically.</p>	
<p>11. Affected public (<i>Mark primary with "P" and all others that apply with "X"</i>)</p> <p>a. <input checked="" type="checkbox"/> P Individuals or households d. <input type="checkbox"/> Farms</p> <p>b. <input type="checkbox"/> Business or other for-profit e. <input type="checkbox"/> Federal Government</p> <p>c. <input type="checkbox"/> Not-for-profit institutions f. <input type="checkbox"/> State, Local or Tribal Government</p>	<p>12. Obligation to respond (<i>Mark primary with "P" and all others that apply with "X"</i>)</p> <p>a. <input type="checkbox"/> P Voluntary</p> <p>b. <input checked="" type="checkbox"/> G Required to obtain or retain benefits</p> <p>c. <input checked="" type="checkbox"/> G Mandatory</p>
<p>13. Annual reporting and recordkeeping hour burden</p> <p>a. Number of respondents 2350</p> <p>b. Total annual responses 2350</p> <p> 1. Percentage of these responses collected electronically 100 %</p> <p>c. Total hours requested 979</p> <p>d. Current OMB inventory 0</p> <p>e. Difference 979</p> <p>f. Explanation of difference</p> <p> 1. Program Change 0</p> <p> 2. Adjustment 979</p>	<p>14. Annual reporting and recordkeeping cost burden (<i>in thousands of dollars</i>)</p> <p>a. Total annualized capital/startup costs 0</p> <p>b. Total annual costs (O&M) 0</p> <p>c. Total annualized cost requested 0</p> <p>d. Current OMB inventory 0</p> <p>e. Difference 0</p> <p>f. Explanation of difference</p> <p> 1. Program change 0</p> <p> 2. Adjustment 0</p>

<p>15. Purpose of information collection (<i>Mark Primary With "P" and all others that apply with "X"</i>)</p> <p>a. <input type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management</p> <p>b. <input type="checkbox"/> Program evaluation f. <input checked="" type="checkbox"/> Research</p> <p>c. <input type="checkbox"/> General purpose statistics g. <input type="checkbox"/> Regulatory or compliance</p> <p>d. <input type="checkbox"/> Audit</p>	<p>16. Frequency of recordkeeping or reporting (<i>check all that apply</i>)</p> <p>a. <input checked="" type="checkbox"/> Recordkeeping b. <input checked="" type="checkbox"/> Third party disclosure</p> <p>c. Reporting</p> <p>1. <input checked="" type="checkbox"/> On occasion 2. <input checked="" type="checkbox"/> Weekly 3. <input checked="" type="checkbox"/> Monthly</p> <p>4. <input checked="" type="checkbox"/> Quarterly 5. <input checked="" type="checkbox"/> Semi-annually 6. <input checked="" type="checkbox"/> Annually</p> <p>7. <input checked="" type="checkbox"/> Biannually 8. <input checked="" type="checkbox"/> Other (describe) <u>Once</u></p>
<p>17. Statistical methods</p> <p>Does this information collection employ statistical methods?</p> <p style="text-align: center;">X Yes Q No</p>	<p>18. Agency contact (<i>person who can best answer questions regarding the content of this submission</i>)</p> <p>Name: <u>Melonie Williams</u></p> <p>Phone: <u>202.566.2279</u></p>

19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal agency, I certify that the collection of information encompassed by this request complies with' 5 CFR 1320.9.

NOTE: The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It uses plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention periods for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
 - (I) Why the information is being collected'
 - (ii) Use of information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, or mandatory);
 - (v) Nature and extent of confidentiality; and
 - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of the instructions);
- (I) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of these provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Program Official	Date
Signature of Senior Official or designee <div>Oscar Morales, Director Collection Strategies Division Office of Environmental Information</div>	Date

Certification Requirement for Paperwork Reduction Act Submissions

5 CFR 1320.9 reads “As part of the agency submission to OMB of a proposed collection of information, the agency (through the head of the agency, the Senior Official or their designee) shall certify (and provide a record supporting such certification) that the proposed collection of information --

“(a) is necessary for the proper performance of the functions of the agency, including that the information to be collected will have practical utility;

“(b) is not unnecessarily duplicative of information otherwise reasonably accessible to the agency;

“(c) reduces to the extent practicable and appropriate the burden on persons who shall provide information to or for the agency, including with respect to small entities, as defined in the Regulatory Flexibility Act 5 U.S.C § 601(6)), the use of such techniques as:

“(1) establishing differing compliance or reporting requirements or timetables that take into account the resources available to those who are to respond;

“(2) the clarification, consolidation, or simplification of compliance and reporting requirements; or collection of information , or any part thereof;

“(3) an exemption from coverage of the collection of information, or any part thereof;

“(d) is written using plain, coherent, and unambiguous terminology and is understandable to those who are to respond;

“(e) is to be implemented in ways consistent and compatible, to the maximum extent practicable, with the existing reporting and recordkeeping practices of those who are to respond;

“(f) indicates for each recordkeeping requirement the length of time persons are required to maintain the records specified;

“(g) informs potential respondents of the information called for under § 1320.8(b)(3); [see below]

“(h) has been developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected, including the processing of the information in a manner which shall enhance, where appropriate, the utility of the information to agencies and the public;

“(I) uses effective and efficient statistical survey methodology appropriate to the purpose for which the information is to be collected; and

“(j) to the maximum extent practicable, uses appropriate information technology to reduce burden and improve data quality, agency efficiency and responsiveness to the public.”

NOTE: 5 CFR 1320.8(b)(3) requires that each collection of information:

“(3) informs and provides reasonable notice to the potential persons to whom the collection of information is addressed of:

“(I) the reasons the information is planned to be and/or has been used to further the proper performance of the functions of the agency;

“(ii) the way such information is planned to be and/or has been used to further the proper performance of the functions of the agency;

“(iii) an estimate, to the extent practicable, of the average burden of the collection (together with a request that the public direct to the agency any comments concerning the accuracy of this burden estimate and any suggestions for reducing this burden);

“(iv) whether responses to the collection of information are voluntary, required to obtain or retain a benefit (citing authority), or mandatory (citing authority);

“(v) the nature and extent of confidentiality to be provided, if any (citing authority); and

“(vi) the fact that any agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.”